



REPORT ONE:

Summaries, Questions and Recommendations Pertaining to the Proposed College of Medicine at the University of Illinois at Urbana-Champaign

Prepared for the Illinois Student Senate by
the Ad-Hoc Committee on the College of Medicine

February 8, 2015

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I. FORWARD

At the beginning of the academic year, the University of Illinois at Urbana-Champaign administration put forward a proposal to develop a new independently accredited College of Medicine at our campus. The proposal began with a document seeking a preliminary endorsement from the Senate of the Urbana-Champaign Campus (hereafter, Campus Senate). This proposal was first introduced to the Educational Policy Committee (EPC) prior to its submission to the Campus Senate.

One of EPC's first steps in reviewing the document seeking a preliminary endorsement was a public hearing. After the hearing, a student approached the EPC Chair and a student member of EPC with a concern: faculty, staff and administrators dominated the hearing.

Of course, a lack of student voice was not the intent of EPC or the proposal's sponsors. For many students, "public hearings" occur everyday on social media, so low student turnout at a standard public hearing is not surprising. However, as the "Official Voice of the Student Body," we believe that a lack of student voice in any large campus decision is a problem that must be promptly addressed.

This is why the Illinois Student Senate (ISS) unanimously adopted the resolution IA.2015.09 *Creation of an Ad-Hoc Committee on the College of Medicine* on October 22, 2014. This resolution charged a new ad-hoc committee with the responsibility to serve as a place for students to engage in the exploration of developing a new College of Medicine. Additionally, the committee was charged with submitting a report—with its discussions and opinions—to the ISS prior to any vote on the College of Medicine in the Campus Senate.

Student Body President Mitch Dickey then appointed a committee of dedicated students to explore, discuss and report on the proposals to develop a new College of Medicine. With experience in EPC and other academic affairs—and a passion for public health communication—President Dickey chose Student Body Vice-President Matt Hill to chair the committee. Vice-President Hill led students from a variety of colleges, experiences and interests in the future of health and wellness together to complete the committee's charges.

Overall, we were filled with much excitement exploring and discussing the possibility of a new College of Medicine at the flagship university in the state of Illinois. We hope that the proposal for a new College of Medicine continues moving forward, and we hope that we will be able to continually represent students throughout its process.

AD-HOC COMMITTEE ON THE COLLEGE OF MEDICINE

Matt Hill, Chair

Brandon Jones

Elizabeth Arcan

Dean Meyer

Kaylee Barron

Alyssa Neimark, *voting ex-oficio*

Alex Geddes

Collin Schumock

Shravan Gupta

Jay Shah

Sarah Halko

Aditi Warhekar

Kendal Hellman

II. EXECUTIVE SUMMARY

The Illinois Student Senate (ISS) serves as the "Official Voice of the Student Body" at the University of Illinois at Urbana-Champaign. It strives to represent the views and needs of students to campus administration, local, state, and federal governments and the public. Our committee's goal, as a subsidiary unit of the ISS, is to adequately supply Student Senators and their constituents with information pertaining to the College of Medicine. In addition, we also pose some questions and recommendations to the individuals participating in the development of the College of Medicine.

Throughout end of Fall 2014 and beginning of Spring 2015, our committee explored various documents pertaining to the proposal to create a new College of Medicine at the University of Illinois at Urbana-Champaign. We engaged in research and discussions, and eventually decided it would be best divide our thoughts into sections based on different stakeholders in the creation of the new COM. The stakeholders we chose to focus on are students, Carle, the University of Illinois and the state of Illinois and beyond. Each section focuses one (1) providing relevant information summarized from our research and discussions, (2) some questions and concerns, and (3) general recommendations we have for the campus moving forward.

On February 9, 2015, the Campus Senate is scheduled to vote on EP.15.33 *Proposal to Create a College of Medicine at the University of Illinois at Urbana-Champaign in Partnership with Carle Health System*. This proposal was approved by the Senate Committee on Educational Policy and comes attached with many letters of support from the academic deans, government agencies, peer institutions and more.

We hope Student Senators find our report helpful to make an informed decision when voting on EP.15.33, and based on our findings and discussions we hope they will plan to support EP.15.33.

III. STAKEHOLDER SUMMARIES, QUESTIONS & RECOMMENDATIONS

A. STUDENTS

The proposal to create a new, independent and autonomous College of Medicine at the University of Illinois at Urbana-Champaign has been carefully constructed with respect to its inevitable effects on the entire student population. The general student population will not suffer any funding setbacks, which may be a concern for some of them. In fact, the new College of Medicine will attract more outside funding into the university and improve the global reputation of the entire Illinois community.

The students enrolled in the new College of Medicine will come from unique backgrounds in STEM-related fields and receive a revolutionary medical education, accordingly. This will lead to a wide-variety of professional opportunities that will benefit the students, the university and the state of Illinois.

The current MD/PhD students that are located in Urbana through the University of Illinois at Chicago College of Medicine will not face interference with the establishment of a new College of Medicine at the University of Illinois at Urbana-Champaign. Current MD/PhD student enrolled in the UIC program will still be able to complete their degrees on the program's Urbana regional campus.

Overall, students from all across campus should only experience minimal adjustments due to the creation of the College of Medicine. Therefore, we hope students will be thankful of the university's effort to embark on such an endeavor.

General Student Population

It is vital to evaluate the creation of the College of Medicine's ramifications on the general student population at Illinois, especially in terms of financing.

According to the business plan (Document B), the new COM will not require the reallocation of any funds from other areas of the campus. The new COM will not receive its funding exclusive from current university funding or General Revenue Funds (GRFs) from the state of Illinois. Instead, it will receive its funding heavily from medical partners—including Carle—and private donors. Thus, the rest of the student population should not anticipate any adverse effects on their education, tuition or financial aid from a loss of funding due to the new COM.

The new COM is also expected to bring significantly more funding through federal grants from the National Institutes of Health (NIH) to campus. As a public university that ranks in the top 10 for a wide number of educational funding sources, Illinois is only a moderate benefactor of the NIH, ranking consistently in the mid-70s, due to its lack of a medical school.

When compared to similar schools in reputation, the University of Illinois at Urbana-Champaign is too large and competitive of a school to not provide a College of Medicine to students. The new COM will validate our campus' academic reputation and thus boost our prominence. In turn,

this shall be reflected by a higher prestige associated with all fields of Illinois degrees and therefore benefiting the entire student population.

In summary, with the creation of the new COM, Illinois will become even more competitive in educational funding and establish itself as an even more prestigious university with expertise in an even wider-variety of fields. This reputation will benefit students of all fields.

Students Enrolled in New College of Medicine

As it has been publicized, this new COM will not provide a traditional medical education. Rather, it will pioneer an innovative curriculum that heavily incorporates the strong engineering skills that Illinois is already known for. This will serve to revolutionize medical education, research and technology.

The first class of students will begin classes in the fall semester of 2017. This founding class will consist of 25 students, but the new COM will grow throughout the start-up phase (ending in 2024-2025) to an eventual capacity of 50 students per class. The admitted students will have an undergraduate background in non-traditional pre-med majors including fields like computer science, bioengineering and more.

The tuition for this education will be slightly higher than the average rate but not at a significant enough margin to deter students from entering the program. The program is also designed in such a way that if 30% of the tuition is never paid, the new COM will still be adequately functional, according to the Senate Committee on Budget.

The graduates of this program will have exclusive career opportunities that will bring prosperity to the Urbana-Champaign community along with the entire state. Many of the modern medical innovations are sprouted from the roots of software, electronics and optics. We anticipate that these graduates will take their skills to a diverse field of research opportunities, start-up companies specializing in medical innovations and organizations across the state—including the boundless opportunities in Chicago, central Illinois, and elsewhere in the state (Document B, p.38).

The medical students produced by the new COM will have a unique education that will bring benefits and prosperity to the Champaign-Urbana community and beyond. The students enrolled in the new COM may be limited by class population, but their opportunities will be limitless.

Current MD/PhD Students Enrolled through UIC

A common concern regarding the creation of the new COM has been how the transition will affect the current MD/PhD students enrolled in the University of Illinois at Chicago College of Medicine on the Urbana regional campus.

The business plan is specifically designed to protect the current MD/PhD students from any possible disruptions in their education through the new COM's creation. All current MD/PhD students in UIC's program who are located at the Urbana branch will continue and complete their current degrees in Urbana (Document C, p. 4).

We are confident that the creation of the College of Medicine will not be unfair to the current medical students located at the Urbana branch

Questions

- In the curriculum plan (Document B, p. 44), it states that lectures in the new COM will occur entirely online. Will these online lectures be renewed often or will the lectures be reused?

Recommendations

Generally, the new COM will benefit the overall general student population. However, there have been some concerns about the online portions of lectures that will be used to teach students in the new COM. Undergraduate students who disliked the online portions of general chemistry at Illinois raised this concern. Based on this, we would recommend:

1. Do not use the same online lecture videos for an extended period of time. Instead, they should be updated every few years.
2. Plan to gather feedback from students enrolled in the new COM about how well they feel they are learning from the online portions in their education.

Additionally, we have recognized that one popular reason to establish the new COM is because its innovative approach to medical education offers opportunity for faculty, staff and students to engage in the medical field. We wholeheartedly agree and recommend:

1. Ensure that members of the entire campus community have academic and co-curricular opportunities to engage with the new COM before, during and after its creation.

Lastly, we feel there are two improvements that can be made in terms of engaging students in the development process:

1. Explore communication efforts that can increase student awareness and knowledge about the new COM.
2. Although the development of the new COM may not require direct student participation (aside from standard shared governance processes in the Campus Senate), we suggest that students become more involved in development processes and discussions.

B. CARLE

Clinical Training

As the primary benefactor of this proposed institution, Carle Foundation Hospital not only positions itself in an influential financial situation, but also one of large commitment to the students and community to which it is engaging. The clerkship (also known as clinical rotations) and graduate medical education (known as residency) of the nearly 25 (rising to 50 thereafter in subsequent years) additional students expected will require more opportunities for clinical rotations in semesters following Fall 2017. Already, Carle Health System alone is

providing more than half of the clerkship seats to Urbana-based medical students, according to Document B, p. 53.

Currently and as stated, Carle is taking on the majority of clinical rotation seats for medical students in the region, with Presence Hospital in Urbana taking up the next large portion at 15% percent (Document B, p. 53.) In elaboration, Carle Hospital is currently accredited by various organizations in four specialties, including Family Medicine, General Surgery, Oral Maxillofacial Surgery and Internal Medicine; they are actively seeking further accreditations as well (Document B, p.54). In total, approximately 50 spots exist for graduated medical students seeking education in these specific disciplines at Carle Hospital alone.

Therefore, we believe that Carle itself is sufficiently prepared to take on new medical students, especially considering its own accolades and sheer size and structure. The technology at Carle is modern and up to date, and it assuredly will be advanced enough to meet the equal demands of an engineering-oriented medical curriculum.

However, questions about whether residency accreditation will expand, as well as if research opportunities and other disciplinary training will become available, still linger. With a growing number of student-doctors training on a more technological background, it may be necessary for the supporting health-care operators in the area to become revamped and briefed on Carle's expectations for this program (should they desire to take part in educating future incoming classes). Analysis has been conducted, and suggests that adequate resources are available at all existing clinical sites, but this evaluation arouses some skepticism in the opinion of our committee (Document B, p. 53).

Facilities

We feel that matters of facility usage and sufficient educational space for laboratory practice, surgical techniques and other medical disciplines should be at the forefront of discussion while creating the new COM. This is especially true considering that ideas of expansion and construction are already circulating from our own discussions, although current budget estimates wage about \$18 million dollars will be invested into creating necessary educational compartments (Document B, p.60). Moreover, it should be noted that space currently occupied by the UIC COM on the Urbana campus will not be used by the new COM.

Nevertheless, the new COM will take part on a large portion of university-owned property, including the North Quad and engineering-based laboratories, the Institute for Genomic Biology, as well as the Biomedical Research Center at Carle (Document B, p. 59). In a cost-effective manner, the university itself is to bear no financial burden in the updating or renovation of any facilities in preparation for the new medical school. However, we are curious as to how actual space division will work logically. Already, these facilities are populated with thousands of undergraduate students around the clock, and determining who takes priority in registering laboratory time or has access to certain workspaces will certainly become a component in our discussions. Even though the new COM will only have a small population of students, we still think this is a point of curiosity.

Thus, it is of particular interest that Carle and auxiliary health-care providers of the Urbana-

Champaign area, whom of which were aforementioned, be scrutinized for their capacity to take on these new medical students and whether or not adequate hands-on education and personalized technical training can be provided to these aspiring physician-scientists. Furthermore, the question of facility logistics and degree of renovation that will take place (and whether or not the accuracy of these estimates is dependable) are the some concerns of our committee.

Questions

- As the development of Carle exceeds forward in the coming years, will other medial operators in the region (Provena, Christie Clinic, etc.) be well equipped to take on residents from the new COM?
- Will Carle start expanding its accreditations?

Recommendations

Expanding on our questions for this section, we only have one recommendation:

1. Ensure that other medical providers in the surrounding community will remain equipped to maintain their specialties and thus offer valuable programs to medical student residents.

C. THE UNIVERSITY OF ILLINOIS

Establishing a College of Medicine at University of Illinois at Urbana-Champaign brings about widespread benefits to the entire University of Illinois community and system. First of all, a truly innovative program that combines both the rigors of the engineering expertise at Illinois with the field of medicine will provides us with the ability to solve medical problems using engineering focused principles.

The entire healthcare industry is rapidly changing as it is constantly working on implementing the newest technology into the field. With the integrated medical education, the new College of Medicine (hereafter, COM) will elevate the quality of care provided to patients using new innovations developed by the college. These discoveries and innovations will contribute to driving down overall patient care costs. The re-invented health care focused around the improvements in engineering and technology allows for research and education in the field of medicine to be improved (Document B, pg. 23).

Not only does the future of the healthcare industry benefit from this new program, but the local community will benefit with the recruitment of young professionals in the field, a plethora of businesses and technology start ups and the additional 7,600 jobs to be added directly to the state (Document B, pg. 8)

As previously stated, there are many positive benefits for the new COM. There is an obvious economic benefit with the increase in local employment through the local community, Carle and the university. The new COM will positively work together with the university and Carle hospital bringing benefits to each other which in turn help increase the academic reputation of the entire university and the increase the hospital recognition for Carle. By creating a separate COM from UIC, the University of Illinois system is set up to bring in more NIH funding with

two separate eligible schools when compared to the amount UIC currently receives standing alone.

Given the countless opportunities present at Illinois, it seems like partnering with a local hospital such as Carle provides us with all the tools necessary to provide a new program such as the proposed COM. Carle is a large, affluent and well-funded healthcare system that is obviously the most prepared and capable of funding and supporting additional medical students, physicians seeking residency and fellowships when compared to the surrounding facilities. Given that the COM is not an independent entity within the university, there will be fewer challenges present in becoming accredited. Accreditation leads to the possibilities of partnering with regional and national organizations that, in turn, will help further the reputation of the university. The partnership between Carle and the university will provide Illinois with the tools necessary secure top-notch faculty, hospital facility space and monetary assistance.

The Existing University of Illinois at Chicago College of Medicine

The University of Illinois at Chicago College of Medicine was established in 1882 as the “College of Physicians and Surgeons of Chicago.” In 1913, faculty and alumni of the college bought and gave the shares of the school’s stock to the Board of Trustees and the school became the “College of Medicine of the University of Illinois.” In 1970, the Illinois legislature expanded the college to three more regional campuses, adding one in Peoria, Rockford and Urbana, in order to increase Illinoisans ability to access medical care¹. In its present form, the college is known as the University of Illinois College of Medicine (hereafter, UIC COM). The UIC COM is currently the largest medical school in the country.

The existing UIC COM is an obvious stakeholder in the plan for the creation the new College of Medicine at the University of Illinois at Urbana-Champaign. The UIC COM commissioned their own business plan, which was carried out by Manatt Health Solutions. Manatt’s report proposes a different plan that does not involve the creation of a new, separately accredited medical school at the University of Illinois at Urbana-Champaign. We will explore some benefits to the new College of Medicine (hereafter, new COM) as well as some existing concerns.

Advantages

Tripp-Umbach created the business plan for the new COM, and it claims that the creation of a separate new COM will allow the two different colleges to focus on their own respective fields of interest—the new COM on engineering and medicine and the UIC COM on urban and rural health (Document B, pp. 11-12). The Tripp-Umbach report also says that the creation of the new COM will have a “multiplier effect” leading to new clinical trials at both the Urbana campus and Chicago campus (Document B, p. 11). The new COM could attract new engineering or medical researchers who would not come to the UIC COM otherwise, and collaborate with other researchers already in the UIC COM (Document B, pp. 11-12).

The proposed new COM will not use funds from the state General Revenue Funds (GRF) and therefore the colleges will not compete for funding from that source (Document B, p. 11). In theory, if the UIC COM should choose to shut down its Urbana branch after the creation of a

¹ <http://www.medicine.uic.edu/about/history>

new COM, the UIC COM could send the saved funds to its other campuses. Further, both COMs could compete for NIH grants and funding. If they both are able to receive these sources of funds, the combined total NIH funding could surpass what the UIC COM has currently.

Disadvantages

The most obvious con for the UI-COM would be the presence of two separate COMs on the Urbana campus. While the plan as written by Tripp-Umbach says that the Urbana branch of the UIC COM and its Medical Scholars (MD/PhD) program will be left alone, there could potentially be problems with two separate programs existing side by side with the new COM's own program indefinitely. Further, as highlighted by the Manatt report, the UIC COM does already participate in programs that combine engineering and medicine. (Document #, pp. 12-13). UIC's Department of Bioengineering is part of both the College of Engineering and the College of Medicine. The UIC Colleges of Engineering and Medicine both participate in UIC's "Innovation Center" and have worked to integrate clinical and research programs. UIC has also been working on expanding their marriage of Chemical Engineering with medicine, and they are currently building an "Advanced Chemical Technologies Building."

Questions

- What will the economic impact be on the UIC COM if the new COM is created?
- Will the Urbana branch of the UIC COM close its programs or modify them at all?

Recommendations

We recommend that both the University of Illinois at Urbana-Champaign and the University of Illinois at Chicago work together moving forward. There exist some seemingly irreconcilable differences between the new COM plan and the UIC plan for the future. Regardless of these differences, the respective campuses need to work to maximize the benefit for the entire university system, the state of Illinois the students of each school and not their own respective interests. This committee recommends—should a new COM be created on the Urbana campus—that each campus focuses on their own unique areas of medical and scientific interest. Of course, there will be some overlap, but we hope by virtue of differentiation there will be less competition between the schools.

D. STATE OF ILLINOIS AND BEYOND

The creation of a new College of Medicine at the University of Illinois at Urbana-Champaign seemingly has many exciting opportunities for those within the University of Illinois community. Driving together our engineering expertise while renovating medical education will provide students, faculty, staff and many others within our community the ability to further discover and innovate the medicine fields. However, the opportunities for our university will not solely exist in an enclave—they will hopefully reach far and wide.

As the entire healthcare industry undergoes changes in policy, technology and more, higher education institutions have a responsibility to solve arising problems associated with these changes. The discoveries and innovations that occur as a result of the new COM have the potential to reach far into the surrounding Urbana-Champaign community, state of Illinois, country and world.

There are three primary avenues that will drive the new COM to reach far and wide: research, economic development and people.

Research

One of the ways the new COM will be able to impact people everywhere will be because of the medical discoveries and innovations it catalyzes through research. The Business and Financial Plan predicts that \$100 million will be associated with research expenditures by 2035 (Document B, p. 55). The goals of this research include developing and growing:

- Research programs that combine engineer, basic and applied health sciences, and medicine.
- Transformative research programs that take advantage of computer sciences, big data, and mobile technology aiming at improving healthcare outcomes.
- Open research models that unite “disciplines and organizations to facilitate innovation and creativity.”

We find all of these research goals inclusive, strategic and attainable. Research is part of the core mission of the university and gives faculty and students the ability to make breakthrough discoveries.

Another portion of the research plan that we appreciate is listed in Document C. It states that both the new University of Illinois at Urbana Champaign College of Medicine and existing University of Illinois at Chicago College of Medicine will benefit from funding through the NIH (Document C, p. 4). Through some of the conversations our chair had with faculty and administrator, we discovered that the University of Illinois at Urbana-Champaign is sometimes unable to obtain grants because we lack resources that come with a College of Medicine. This hinders our ability to impact communities within the state and beyond.

The minds of our engineers, biologists, health scientists and more need money to facilitate breakthrough medical research. Establishing a new COM will greatly increase the chances of funding and thus innovative medical collaboration.

Economic Development

To begin creating the new COM, an initial investment of \$3.7 million would need to be contributed in the 2015-2016 school year (Document B). Over time, beginning in 2024, the annual operating expenses after the start-up phase will be at \$35.4 million a year (Document B). It is also relevant to note that Carle Foundation Hospital will be contributing \$11.5 million during the start-up phase (Document B).

In addition to the potential discoveries and innovations that will result from the new COM in the future, there are still immediate benefits that communities will experience. After it is fully developed, Document C predicts that the new COM will generate \$1 billion each year by 2035 (p. 4). Document C also says this includes adding over 7,600 jobs across the state of Illinois (p. 4). A 2011 report from the Champaign County Economic Development Corporation projected the local healthcare industry to be the largest source of nonfarm private employment (Document B). By 2040, there will be an estimated 9,542 additional healthcare jobs created (Document B).

We have known that states that have strong, researched-based higher education institutions make large contributions to local economies, and we feel that this revenue and job-creation will be beneficial for the local economy and eventually the state economy.

Both the University of Illinois at Urbana-Champaign and Carle are already leaders in supporting the local and state economy, and the new COM should further both institution's economic contributions. For example, Document B states that Colleges of Medicines attract local businesses and high talent, which thus contribute to a growing economy (p. 37). One concern we do have though is with the economic impact the 25 graduates will be able to make. Document B clearly says that the unique knowledge and skill-sets of the new College of Medicine's physician-scientists will position them for jobs in cities (p. 38). However, we are a little skeptical of how many contributions these physician-scientists will be able to make to the local and state economies away from a research-based institution, especially if they choose to become just full-time physicians. Also, there is no guarantee that these highly trained physician-scientists will stay in the local community or state. This causes further concern as to whether the return on investment for the new COM is as high as expected.

Overall, the new COM in Urbana-Champaign will help keep talent in town as well as the state of Illinois. With the focus of the new COM being on both medicine and engineering, it will allow us to retain and recruit more physicians and scientists into the central Illinois region. The new COM will not only attract faculty and staff, but it will also attract medical technology and start-up companies looking to pair with the new COM on research and development. With a large number of physician-scientists in the area, new companies will look to establish businesses in the area because they will be closer to working with some of the best and most innovative minds in the field.

People

One of the core parts of this report has focused on stakeholders associated with the new COM. When looking at the overall impact of the new COM, however, it seems that a driving force behind its successes elsewhere will rely heavily on individuals.

There will be the people within the new COM—faculty, staff and students—that will collaborate with many more of the fantastic individuals at the University of Illinois at Urbana-Champaign and other entities to drive discoveries, create innovations and revamp medical education. In turn, their dedication, knowledge and deliverables will have a huge impact on other individuals in the community, state, county and beyond.

We are confident that the new COM will be able to equip a variety of individuals with the necessary tools to create societal impact in the healthcare industry.

Questions

As we have reviewed College of Medicine proposal documents, we do not have any present questions associated with the impact that it will have on wider communities.

Recommendations

Although we recognize the scope of the College of Medicine has the potential to contribute great impacts to our society, we would like to outline some basic recommendations to ensure the College of Medicine makes successful imprints on medical education and healthcare:

1. Develop meaningful and lasting relationships with other medical schools, government agencies, foundations, corporations, nonprofits and all other entities that can assist in advancing the mission of the College of Medicine and University of Illinois.
2. Focus on including faculty and researchers at the University of Illinois at Chicago in activities to further advance the scope of the new College of Medicine.
3. Vigorously encourage faculty, staff and students to dream big and make sure that the knowledge, discoveries and innovations reach far and wide—from the surrounding community, the state of Illinois and beyond.

IV. FUTURE GOALS

As the new COM proposal moves forward through approval processes and its development, we hope that our committee will still be able to effectively represent the student body. In doing so, we have developed some tentative goals for our committee to complete during its tenure:

1. Distribute a survey to the student body to (1) collect student opinions on the new College of Medicine and (2) increase awareness about the proposal.
2. Host a panel for College of Medicine organizers to speak with students.
3. Contacting the undergraduate, graduate and medical student governments at the University of Illinois at Chicago to learn their feelings and opinions on the proposal and how our two Colleges of Medicine may be able to work together in the future.
4. Enhance the facilitation of student opinions and student representation in the development of the College of Medicine.
5. Attempt to alleviate concerns that current MD/PhD students may have.

V. APPENDIX

- A. Document A (EP.15.02 – Proposal to Create a College of Medicine at the University of Illinois at Urbana-Champaign in Partnership with Carle Health System – Preliminary Endorsement)

On September 22, 2014, the Campus Senate approved this proposal to give a preliminary endorsement to the creation of the College of Medicine. This document can be accessed here: <http://www.senate.illinois.edu/ep/Props/1415/EP.15.02%20R3%2009.12.14.pdf>

- B. Document B (Business and Financial Plan)

Tripp-Umbach, a consulting firm, put together a detailed plan for the new College of Medicine outlining governance structure, funding, facilities, curriculum and much more. The full document can be accessed here:

http://strategicplan.illinois.edu/documents/Carle_Illinois_NewCOM_Business_Plan2014.pdf

- C. Document C (Business and Financial Plan Summary)

The full business and financial plan was very length, so Tripp-Umbach put together a summary of the report in a smaller document. This document can be accessed here:

http://strategicplan.illinois.edu/documents/Business_Plan_Report_Highlights2014.pdf

- D. Document D (EP.15.33 – Proposal to Create a College of Medicine at the University of Illinois at Urbana-Champaign in Partnership with Carle Health System)

This is the formal proposal to create a new College of Medicine seeking approval from the Campus Senate. This proposal also contains various letters of support in it. It is on the agenda for February 9, 2015. The document can be accessed here:

<http://www.senate.illinois.edu/ep/Props/1415/FINAL/ep1533.final.pdf>

- E. Illinois Student Senate Resolution

On October 22, 2014, the ISS unanimously approved the resolution IA.2015.09 to commission the Ad-Hoc Committee on the College of Medicine. The resolution stated the committee must submit a report to the ISS prior to any Campus Senate vote on the College of Medicine. The resolution can be found here:

<https://docs.google.com/a/illinois.edu/file/d/0B9aJp4d6IL91cXpjNk82RFFYVTg/edit>

- F. *Daily Illini* Article

The Daily Illini published an article titled “ISS calls for student input on proposed College of Medicine” on November 4, 2014. The article highlighted the initial creation of the committee. The article can be found here: http://www.dailyillini.com/news/article_ac54bcf6-63d4-11e4-a67d-0017a43b2370.html

G. Committee Membership

Matt Hill, Chair

Hill is a junior in the College of Liberal Arts & Sciences working towards a double major in Political Science and Communication. He is also seeking a Public Relations Certificate from the College of Media. Hill serves as the Student Body Vice President at the University of Illinois at Urbana-Champaign and the Vice-President External of the Illinois Student Senate. He has also been a member on the Senate Committee on Educational Policy for two years.

Elizabeth Arcan

Arcan is a junior in the College of Liberal Arts & Science working towards a double major in Psychology and Molecular & Cellular Biology. She is also obtaining a minor in Chemistry and on the pre-med track.

Kaylee Barron

After pursuing an undergraduate degree in Community Health at Illinois, Barron has returned to pursue a graduate degree in Higher Education through the College of Education. Barron also serves as a Graduate Assistant in the Office of the Dean of Students where she assists in advising the Illinois Student Senate.

Alex Geddes

Geddes is a junior in the College of Liberal Arts & Sciences majoring in Molecular and Cellular Biology with a minor in Chemistry.

Shravan Gupta

Gupta is a junior in the College of Engineering but is also working towards a minor in Music from the College of Fine & Applied Arts. Gupta is the student who originally had the idea to create the committee.

Sarah Halko

As a current member on the ISS Committee on Academic Affairs and its past Chair, Halko joined the committee with prior experience navigating academics. She is currently a senior in the College of Liberal Arts & Sciences completed her major in Political Science.

Kendal Hellman

Coming from lots of experience in the health industry, Hellman is now a senior in the College of Applied Health Science majoring in Community Health with a focus in Health Planning and Administration. Hellman has also been a student volunteer at Carle for three years and served on the ISS Committee on Academic Affairs for two years. She also currently serves as a Student Senator.

Brandon Jones

Jones is a junior in the College of Liberal Arts & Sciences majoring in Molecular & Cellular Biology with a minor in Chemistry and pre-med track.

Dean Meyer

As a sophomore in the College of Liberal Arts & Sciences, Meyer is double majoring in Political Science and Economics. Meyer currently serves on the Senate Committee on Educational Policy and as an Assistant to the ISS President for Community Relations.

Alyssa Neimark, *voting ex-oficio*

Currently, Neimark serves as the Chair of the ISS Committee on Academic Affairs. She is a senior in the College of Applied Health Sciences majoring in Interdisciplinary Health Sciences and is on the pre-med track. She has worked a Carle as a student employee for XX years and served as a Student Senator for two years.

Collin Schumock

Schumock is a sophomore in the College of Liberal Arts & Sciences double majoring in Political Science and Economics. He is also obtaining an Applied Statistics minor. Schumock currently serves on the ISS Committee on Academic Affairs.

Jay Shah

Shah is a junior in the College of Liberal Arts & Sciences who is double majoring in Economics and Molecular & Cellular Biology. In addition, Shah is working towards a minor in Chemistry, is on the pre-med track and serves the university as an LAS Leader.

Aditi Warhekar

Warhekar is a sophomore in the College of Engineering majoring in Bioengineering. She is also working towards a minor in Chemistry, is on the pre-med track and serves on the McKinley Health Advisory Board.